| PATENT APPLICATION  |  |   | RD                | Application            |                               |                        | ibier                      |  |
|---|--|---|-------------------|------------------------|-------------------------------|------------------------|----------------------------|--|
| Effec   | tive January 1, 20                                   | 903   |                   | 106                    | 66                            | 800                    |                            |  |
| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |  | SMALL ENTITY TYPE                                     |                   | OR                     | OTHER THAN<br>OR SMALL ENTITY |                        |                            |  |
| TOTAL CLAIMS  | 20   |   | RATE              | FEE                    | 7                             | RATE                   | FÉE                        |  |
| FOR   | NUMBER FILED   | NUMBER EXTRA  | BASIC F           | EE 375.00              | OR                            | BASIC FEE              | 750.00                     |  |
| TOTAL CHARGEABLE CLAIMS   | minus 20=  | • Ø   | X\$ 9:            | •                      | ÓR                            |                        |                            |  |
| NDEPENDENT CLAIMS   |  | · 45  | X42=              |                        | OR                            | X84=                   |                            |  |
| MULTIPLE DEPENDENT CLAIM P  | RESENT   |   | +140:             |                        | OR                            | +280=                  |                            |  |
| \ AVA   |  |   |                   | L                      | OR                            | TOTAL                  |                            |  |
| (Column 1) (Column 2) (Column 3)  |  |   | SMAL              | SMALL ENTITY OR        |                               |                        | OTHER THAN<br>SMALL ENTITY |  |
| CLAIMS REMAINING AFTER AMENDMENT  Total + 20  Independent + 3   | HIGH<br>NUMI<br>PREVIC<br>PAID                       | BER PRESENT<br>DUSLY EXTRA                            | PATE              | ADDI-<br>TIONAL<br>FEE |                               | RATE                   | ADDI-<br>TIONA<br>FEE      |  |
| Total . 20  | Minus ** Z   | 20 -  | X\$ 9=            | 4 .                    | OR                            | X\$18=                 |                            |  |
| Independent + 3 FIRST PRESENTATION OF MI  | Minus ***  JLTIPLE DEPENDENT                         | 3  =<br>CLAIM   | X42=              |                        | OR                            | X84=                   |                            |  |
|   |  |   | +140=             |                        | OR                            | +280=                  | :                          |  |
|   |  |   | TOT/<br>ADDIT, FE |                        | OR                            | TOTAL<br>ADDIT, FEE    |                            |  |
| (Column 1)  | (Colum   |   | • •               |                        | -                             |                        |                            |  |
| REMAINING AFTER AMENDMENT  Total * Independent *  | HIGH<br>NUME<br>PREVIO<br>PAID I                     | BER PRESENT<br>DUSLY EXTRA                            | RATE              | ADDI-<br>TIONAL<br>FEE |                               | RATE                   | ADDI-<br>TIONA<br>FEE      |  |
| Total *   | Minus **   | =   | X\$ 9=            |                        | OR                            | X\$18=                 |                            |  |
| Independent +   | Minus  | = =   | X42=              |                        | OR                            | X84=                   | ·                          |  |
| TEMOS PRESENTATION OF ME  | JUIPUE DEPENDENT                                     | CLAIM   |                   |                        |                               |                        |                            |  |
|   |  |   | +140=             | L                      | OR                            | +280=                  |                            |  |
|   |  | •   | ADDIT, FE         |                        | OR                            | TOTAL<br>ADDIT. FEE    |                            |  |
| (Column 1)<br>CLAIMS  | (Colum   |   |                   |                        |                               | ·                      |                            |  |
| Total   | NUME<br>PREVIO<br>PAID F                             | BER PRESENT   | PATE              | ADDI-<br>TIONAL        |                               | RATE                   | ADDI-<br>TIONA             |  |
| Total •   | Minus  | du =  | X\$ 9=            | FEE                    |                               | V640                   | FEE                        |  |
| Independent .   | Minus ***  | =   | X42=              |                        | OR                            | X\$18=                 | •                          |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |  |   |                   |                        | OR                            | X84=                   |                            |  |
| #1  |  |   |                   |                        | OR                            | +280=                  | , — <del>-</del>           |  |
| If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE  ADDIT. FEE |  |   |                   |                        | OR                            | TOTAL                  |                            |  |
| The Highest Number Previously Pa  | io For IN-IHIS SPACE is<br>I For (Total or Independe | tess than 3, enter "3."<br>(11) is the highest number |                   |                        | in col                        | ADDIT, FEE I<br>umn 1. |                            |  |